PTC/SB/06 (08-03)
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 	Substitute for Form PTO-875									<u> 108</u>	
	CLAIMS AS FILED - PART I (Cotumn 1) (Cotumn 2)						SMALL ENTITY		OR		R THAN ENTITY
L	FOR	MUMBI	ER FILED	NUMBE	ER EXTRA		RATE	FEE		RATE	FEE
(3	SIC FEE CFR 1.16(a))]			OR		5	
G	TAL CLAIMS CFR 1.16(c))	ЙY	minus 20		1.		x 5=		OR	x s	
	DEPENDENT CLAIM CFR 1.16(b))	^s 3	minus 3		4		X \$=		OR	x \$	
M	AULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))						+5_=		OR	+5 =	1
• 1	If the difference in column 1 is less than zero, enter "O" in column 2.						TOTAL		OR	TOTAL	
CLAIMS AS AMENDED - PART II											
12	.20 m	5							OR	OTHE	RTHAN
Ψ		(Column 1)	_	(Cotumn 2)	(Cotumn 3)	1	SMALL	ENTITY	<u>س</u>	SMALL	ENTITY
FINE		REMAINING AFTER AMENDMENT		NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADO+ TIONAL		RATE	ADOI- TIONAL
Į ų	Total (37 CFR 1.18(c))	AMERICAN TO A	Minus	37			x s.)	FEE	~~	\ /	FEE
	Independent (37 CFR 1.18(b))	. 3	Minus	-2	*	1	x s/ :		OR	× . /.	/
		ATION OF MILL TIDE	E DEDEND	ENT CLAIM (37 CF	P 1 18(4)				OR		-/
┢	THOTPRESENT	- ATOM OF MOETIFE		VV	y 1.10(u))	1	TOTAL		OR	TOTAL =)
-	5/4/05			'\	1		ADD'L FEE		_OR	ADD'I FFF	<u> </u>
<u> </u>	3/4/VJ	(Column 1) CLAIMS	r	(Column 2) HIGHEST	(Column 3)	1					
E FIA		REMAINING AFTER AMENDMENT		NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total (37 CFR 1.10(c))	: 34	Minus	-26	=		x s=		OR	X 8=	
MONTE	Independent (37 CFR 1.18(b))	. >	Minus	" 3 -			x \$=		OR	X \$=	
1	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))						+\$=		OR	+ 5=	
Γ	Pd						TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	r.d
	_	(Cotumn 1)		(Column 2)	(Column 3)						
O FIAB		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADOI- TIONAL FEE
١	100B)	•	Minus	**			X \$=		OR	X \$=	
2	Independent (37 CFR 1.18(b))	•	Minus	***	8		X \$=		OR	x \$=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(4))						+\$=	•	OR	+ \$=	
Г							TOTAL ADO'L FEE		OR	TOTAL ADD'L FEE	
If the entry in column 1 is less than the entry in column 2, write "0" in column 3. If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".											
	*** If the "Highest N	lumber Previously	Paid For		is less than 3, e	nter	*3*.	the appropriat	e box in c	olumn 1.	

I ne "Highest Number Previously Paid For" [Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450, DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.